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ART B—ISSUE FEE TRANSMITTAL

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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

HM32/0529

SANFORD E. WARREN, JR.
GARDERE ~~XXX~~ WYNNE ~~XXXXXXXX~~ SEWELL LLP
1601 ELM STREET
SUITE 3000
DALLAS TX 75201-4767

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Marsha S. Green (Depositor's name)

(Signature)

August 20, 2001 (Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
09/488,364	01/12/00	006	SISSON, B	1655 05/29/01

First Named Applicant ELLEDGE, 35 USC 154(b) term ext. = 0 Days.

TITLE OF INVENTION MAMMALIAN CHECKPOINT GENES AND PROTEINS

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
1 120541-1003	530-324.000	G89	UTILITY	YES NO	\$620.00 \$1240.00	08/29/01

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

- GARDERE WYNNE SEWELL LLP
- Sanford E. Warren, Jr.
- Edwin S. Flores

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE Baylor College of Medicine

(B) RESIDENCE: (CITY & STATE OR COUNTRY) Houston, Texas

Please check the appropriate assignee category indicated below (will not be printed on the patent)

☐ Individual ☒ corporation or other private group entity ~~XXXXXXXXXX~~ University

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The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature) Edwin S. Flores (Date) 8/20/01

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

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08/23/2001 SDENB082 00000067 09488364

01 FC:242 620.00 OP
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